

County: St. Croix

Facility ID: 3760

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GLENHAVEN

612 EAST OAK STREET

GLENWOOD CITY 54013 Phone:(715) 265-4555

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/05): 44

Total Licensed Bed Capacity (12/31/05): 44

Number of Residents on 12/31/05: 43

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Non-Profit Corporation

Skilled

No

Yes

Yes

39

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Age, Gender, and Primary Diagnosis of Residents (12/31/05)		Length of Stay (12/31/05)	
Primary Diagnosis	%	Age Groups	%
Developmental Disabilities	4.7	Under 65	2.3
Mental Illness (Org./Psy)	41.9	65 - 74	4.7
Mental Illness (Other)	4.7	75 - 84	25.6
Alcohol & Other Drug Abuse	0.0	85 - 94	58.1
Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.3
Cancer	4.7		-----
Fractures	0.0		100.0
Cardiovascular	25.6	65 & Over	97.7
Cerebrovascular	4.7		-----
Diabetes	2.3	Gender	%
Respiratory	2.3		-----
Other Medical Conditions	9.3	Male	11.6
	-----	Female	88.4
	100.0		-----
			100.0

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Primary Diagnosis		Age Groups		Length of Stay (12/31/05)	
	%		%		%
Developmental Disabilities	4.7	Under 65	2.3	Less Than 1 Year	41.9
Mental Illness (Org./Psy)	41.9	65 - 74	4.7	1 - 4 Years	32.6
Mental Illness (Other)	4.7	75 - 84	25.6	More Than 4 Years	25.6
Alcohol & Other Drug Abuse	0.0	85 - 94	58.1		-----
Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.3		100.0
Cancer	4.7		-----	Full-Time Equivalent	
Fractures	0.0		100.0	Nursing Staff per 100 Residents	
Cardiovascular	25.6	65 & Over	97.7	(12/31/05)	
Cerebrovascular	4.7		-----		
Diabetes	2.3	Gender	%	RNs	9.5
Respiratory	2.3		-----	LPNs	9.0
Other Medical Conditions	9.3	Male	11.6	Nursing Assistants,	
	-----	Female	88.4	Aides, & Orderlies	
	100.0		-----		41.1
			100.0		

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Method of Reimbursement

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		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care							
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	2	7.1	155	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	2	4.7
Skilled Care	3	100.0	346	24	85.7	131	0	0.0	0	12	100.0	145	0	0.0	0	0	0.0	39	90.7
Intermediate	---	---	---	1	3.6	107	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	1	2.3
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	1	3.6	175	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	1	2.3
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	3	100.0		28	100.0		0	0.0		12	100.0		0	0.0		0	0.0	43	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/05				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	24.3	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	0.0	Bathing	0.0	60.5	39.5	43
Other Nursing Homes	1.4	Dressing	14.0	65.1	20.9	43
Acute Care Hospitals	74.3	Transferring	11.6	72.1	16.3	43
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	16.3	60.5	23.3	43
Rehabilitation Hospitals	0.0	Eating	44.2	39.5	16.3	43
Other Locations	0.0	*****				
Total Number of Admissions	70	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	2.3	Receiving Respiratory Care	9.3	
Private Home/No Home Health	26.1	Occ/Freq. Incontinent of Bladder	62.8	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	24.6	Occ/Freq. Incontinent of Bowel	20.9	Receiving Suctioning	0.0	
Other Nursing Homes	0.0			Receiving Ostomy Care	4.7	
Acute Care Hospitals	33.3	Mobility		Receiving Tube Feeding	4.7	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	7.0	Receiving Mechanically Altered Diets	37.2	
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	14.5	With Pressure Sores	14.0	Have Advance Directives	100.0	
Total Number of Discharges		With Rashes	14.0	Medications		
(Including Deaths)	69			Receiving Psychoactive Drugs	67.4	
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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Nonprofit Peer Group %	Ratio	Bed Size: Under 50 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	88.6	93.4	0.95	84.3	1.05	88.8	1.00	88.1	1.01
Current Residents from In-County	60.5	85.9	0.70	76.3	0.79	83.2	0.73	77.6	0.78
Admissions from In-County, Still Residing	20.0	20.9	0.96	27.2	0.74	18.7	1.07	18.1	1.10
Admissions/Average Daily Census	179.5	162.7	1.10	109.2	1.64	177.7	1.01	162.3	1.11
Discharges/Average Daily Census	176.9	162.0	1.09	108.6	1.63	179.2	0.99	165.1	1.07
Discharges To Private Residence/Average Daily Census	89.7	81.3	1.10	40.1	2.24	83.4	1.08	74.8	1.20
Residents Receiving Skilled Care	95.3	97.5	0.98	96.7	0.99	96.3	0.99	92.1	1.04
Residents Aged 65 and Older	97.7	96.3	1.01	97.3	1.00	91.3	1.07	88.4	1.10
Title 19 (Medicaid) Funded Residents	65.1	54.2	1.20	58.1	1.12	61.8	1.05	65.3	1.00
Private Pay Funded Residents	27.9	31.8	0.88	35.3	0.79	22.5	1.24	20.2	1.38
Developmentally Disabled Residents	4.7	0.5	9.96	0.9	5.18	1.1	4.22	5.0	0.93
Mentally Ill Residents	46.5	33.9	1.37	37.1	1.25	34.8	1.34	32.9	1.41
General Medical Service Residents	9.3	25.2	0.37	14.1	0.66	23.0	0.40	22.8	0.41
Impaired ADL (Mean)	53.5	49.3	1.09	50.4	1.06	48.4	1.10	49.2	1.09
Psychological Problems	67.4	57.5	1.17	53.0	1.27	59.5	1.13	58.5	1.15
Nursing Care Required (Mean)	10.5	6.9	1.52	7.2	1.46	7.2	1.46	7.4	1.41